

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

Name (print) Henry(Hank) Harris IVG10 board of Trustees Office (if applicable) _____ District (if applicable) _____
 Mailing Address (include city and zip code) P.O. Box 8543, Incline Village, NV 89452(75) Telephone No. 832-7146
 E-Mail Address Delcerro182002

Select Appropriate Box(es) ☒ CANDIDATE ☐ PAC ☐ BAG ☐ POL PRTY ☐ IND EXP ☐ AMENDED ☐ ANNUAL FILING

☐ Annual Filing - Due January 15, 2004

Period: January 1, 2003 - December 31, 2003

☒ Report #1 - Due August 31, 2004

Incumbents in an Office with a 4-year term Period: Jan. 5, 2001 - Aug 26, 2004
 Incumbents in an Office with a 6-year term Period: Dec. 20, 1998 - Aug 26, 2004
 All others Period: Jan. 1, 2004 - Aug. 26, 2004
 Ballot Advocacy Groups (BAGs) only: Period: Dec. 5, 2002 - Aug 26, 2004

☐ Report #2 Due - October 26, 2004

Period: Aug. 27, 2004 - Oct. 21, 2004

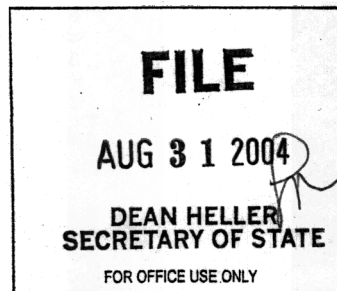
☐ Report #3 Due - January 15, 2005*

Period: Oct. 22, 2004 - Dec. 31, 2004
 BAGs only: Period: Oct. 22, 2004 - Dec. 5, 2004

☐ Annual Filing - Due January 15, 2005

Period: January 1, 2004 - December 31, 2004

* Third Report suffices for 2005 Annual Filing if candidate also filed Report Nos. 1 and 2



CONTRIBUTIONS SUMMARY

Total Monetary Contributions Received in Excess of \$100

2. Total Monetary Contributions Received of \$100 or Less

3. Total Amount of Monetary Contributions Received
 (Add Lines 1 and 2)

4. Total Value of In Kind Contributions Received in Excess of \$100

This Period

Cumulative From Beginning of Report Period #1 Through End of This Reporting Period

This Period

Cumulative From Beginning of Report Period #1 through End of This Reporting Period

EXPENSES SUMMARY

5. Total Monetary Expenses Paid in Excess of \$100

6. Total Monetary Expenses Paid of \$100 or Less

7. Total Amount of All Monetary Expenses Paid
 (Add Lines 5 and 6)

8. Total Value of In Kind Expenses in Excess of \$100

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Signature

EL201.doc

Revised: Jan-04

Date

PAGE 1 OF 1

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State of Nevada

Name (print) Henry (Hank) Harris IVG10 Board of Trustees District (if applicable) 8
 Office (if applicable) P.O. Box 8543, Incline Village, NV 89452-7751 Telephone No. 832-7146
 Mailing Address (include city and zip code) Del Cerro 182002
 E-Mail Address

Select Appropriate Box(es) ☒ CANDIDATE ☐ PAC ☐ BAG ☐ POL PRTY ☐ IND EXP ☐ AMENDED ☐ ANNUAL FILING

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CONTRIBUTIONS SUMMARY

Total Monetary Contributions Received in Excess of \$100

2. Total Monetary Contributions Received of \$100 or Less

This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
<u>0</u>	<u>0</u>
<u>0</u>	<u>0</u>

3. Total Amount of Monetary Contributions Received
 (Add Lines 1 and 2)

4. Total Value of In Kind Contributions Received in Excess of \$100

This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting Period
<u>0</u>	<u>0</u>

EXPENSES SUMMARY

5. Total Monetary Expenses Paid in Excess of \$100

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 (Add Lines 5 and 6)

8. Total Value of In Kind Expenses in Excess of \$100

<u>0</u>	<u>0</u>
<u>0</u>	<u>0</u>
<u>0</u>	<u>0</u>

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Signature Henry W. Harris Date 8/27/04
Henry W. Harris 10/8/2004
 EL201.doc

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State of Nevada

Name (print) Henry (Hank) Harris IVG10 Board of Trustees
 Office (if applicable) P.O. Box 8543, Incline Village, NV 89452(775) 832-7146
 District (if applicable) Delcerre 182002
 Mailing Address (include city and zip code) Delcerre 182002
 Telephone No. 832-7146
 E-Mail Address

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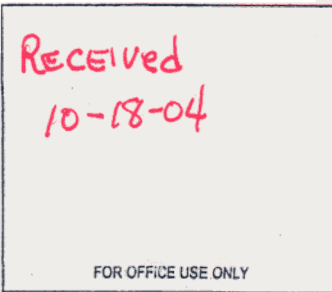
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 2. Total Monetary Contributions Received of \$100 or Less

This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
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 (Add Lines 1 and 2)
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<u>0</u>	<u>0</u>
<u>0</u>	<u>0</u>
<u>0</u>	<u>0</u>
<u>0</u>	<u>0</u>

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Signature Henry W. Harris Date 8/27/04
Henry W. Harris 10/8/2004
 Revised: January